



PTO/SB/82 (09-04)

Approved for use through 11/30/2005. OMB 0651-0035

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**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Serial Number	10/630,233
Filed Date	July 29, 2003
First Named Inventor	Michael P. Schrom
Art Unit	N/A
Examiner Name	N/A
Attorney Docket Number	64862/P062US/10502006

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number:

OR

☐ Firm or
Individual Name

Address

City

Country

State

Zip

Telephone

Fax

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Name

F. Robert Merrill

Date

Executive VP Finance & CFO

4/21/05

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972-309-8000

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐

*Total of _____ forms are submitted.



PTO/SB/96 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

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STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Michael P. Schrom et al.Application No./Patent No.: 10/630,233 Filed/Issue Date: July 29, 2003Entitled: System and Method for Providing a Medical Lead Body Having Dual Conductor LayersMicronet Medical, Inc., a corporation
(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.

The extent (by percentage) of its ownership interest is _____ %

in the patent application/patent identified above by virtue of either:

- A. ☐ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

OR

- B. ☒ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: Schrom, Michael P., et al. To: Micronet Medical, Inc.

The document was recorded in the United States Patent and Trademark Office at
Reel 014848, Frame 0741, or for which a copy thereof is attached.

2. From: _____ To: _____

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3. From: _____ To: _____

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☐ Additional documents in the chain of title are listed on a supplemental sheet.

- ☒ Copies of assignments or other documents in the chain of title are attached.
[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Signature

F. Robert Merrill

Printed or Typed Name

Executive VP Finance & CFO

Title

4/22/06

Date

972-309-8000

Telephone Number